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Dated: _____ Signature: _____

Docket No.: 325772014000
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Takenori IDEHARA

Application No.: 09/482,684

Art Unit: 2624

Filed: January 14, 2000

Examiner: Justin B. Foster

For: METHOD AND DEVICE FOR PROCESSING
IMAGE DATA

AMENDMENT UNDER 37 CFR 1.111

Customer Window, MS Non-Fee Amendment
U.S. Patent and Trademark Office
2011 South Clark Place
Crystal Plaza Two, Lobby, Room 1B03
Arlington, Virginia 22202

Dear Sir:

INTRODUCTORY COMMENTS

This is in response to the non-final Office Action dated October 24, 2003.
Reconsideration and allowance of the pending claims, as amended, in light of the remarks presented herein are respectfully requested.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

VA-51427

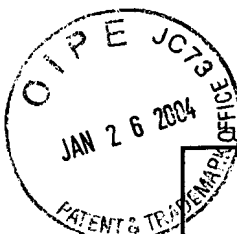
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Approved for use through 07/31/2006. OMB 0651-0031

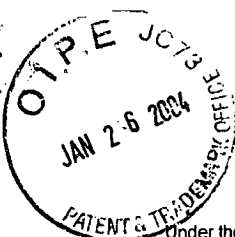
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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|---|----|------------------------|------------------|
| <h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p> | | Application Number | 09/482,684 |
| | | Filing Date | January 14, 2000 |
| | | First Named Inventor | Takenori IDEHARA |
| | | Art Unit | 2655 |
| | | Examiner Name | J. Foster |
| Total Number of Pages in This Submission | 14 | Attorney Docket Number | 325772014000 |

| ENCLOSURES (Check all that apply) | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | <div style="text-align: right;"> <h2>RECEIVED</h2> <p>JAN 28 2004</p> <p>Technology Center 2600</p> </div> |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | MORRISON & FOERSTER LLP Deborah S. Gladstein - 43,636 |
| Signature | <i>Deborah S. Gladstein</i> |
| Date | January 26, 2004 |



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|---|--|--------------------------|---------------------|--------------|
| <h1 style="text-align:center">FEE TRANSMITTAL</h1> <h2 style="text-align:center">for FY 2004</h2> <p style="text-align:center"><small>Effective 10/01/2003, Patent fees are subject to annual revision.</small></p> | | Complete if Known | | |
| | | Application Number | 09/482,684 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Filing Date | January 14, 2000 | |
| | | First Named Inventor | Takenori IDEHARA | |
| | | Examiner Name | J. Foster | |
| TOTAL AMOUNT OF PAYMENT (\$) | | 258.00 | Art Unit | 2655 |
| | | | Attorney Docket No. | 325772014000 |

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------|--|--------------|-----------------|--------------|-----------------|----------|----------|----------|----------|----------|--------------------|--------|------------------------|----------|-------------------|---------|-----------------------------------|----------|------------------|----------|---------------------------------------|----------|--------------------|---------|--|---------|------------------------|--------|--|--|---------------------|------|------------------------|--------|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None | | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The Director is authorized to: (check all that apply) | | Large Entity Small Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) | | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION | | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. BASIC FILING FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%"><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><td>Fee Code</td><td>Fee Code</td><td></td><td></td></tr><tr><td>1001 770</td><td>2001 385</td><td>Utility filing fee</td><td></td></tr><tr><td>1002 340</td><td>2002 170</td><td>Design filing fee</td><td></td></tr><tr><td>1003 530</td><td>2003 265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 770</td><td>2004 385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="2" style="text-align:right">SUBTOTAL (1)</td><td>(\$)</td><td>0.00</td></tr></table> | | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code | Fee Code | | | 1001 770 | 2001 385 | Utility filing fee | | 1002 340 | 2002 170 | Design filing fee | | 1003 530 | 2003 265 | Plant filing fee | | 1004 770 | 2004 385 | Reissue filing fee | | 1005 160 | 2005 80 | Provisional filing fee | | SUBTOTAL (1) | | (\$) | 0.00 | Fee Description | |
| Large Entity | Small Entity | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1001 770 | 2001 385 | Utility filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1002 340 | 2002 170 | Design filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1003 530 | 2003 265 | Plant filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1004 770 | 2004 385 | Reissue filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1005 160 | 2005 80 | Provisional filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | | (\$) | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims 16 -20** = 3 x 86.00 = 258.00 | | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims 8 -5** = 3 x 86.00 = 258.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent | | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%"><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><td>Fee Code</td><td>Fee Code</td><td></td><td></td></tr><tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201 86</td><td>2201 43</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203 290</td><td>2203 145</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204 86</td><td>2204 43</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205 18</td><td>2205 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="2" style="text-align:right">SUBTOTAL (2)</td><td>(\$)</td><td>258.00</td></tr></table> | | | | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code | Fee Code | | | 1202 18 | 2202 9 | Claims in excess of 20 | | 1201 86 | 2201 43 | Independent claims in excess of 3 | | 1203 290 | 2203 145 | Multiple dependent claim, if not paid | | 1204 86 | 2204 43 | ** Reissue independent claims over original patent | | 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | | SUBTOTAL (2) | | (\$) | 258.00 |
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| 1202 18 | 2202 9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1201 86 | 2201 43 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | (\$) | 258.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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